

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
UTILITY PATENT APPLICATION TRANSMITTAL

PATENT  
Total Pages \_\_\_\_\_

NAMED INVENTOR OR APPLICATION IDENTIFIER: David E. Francischelli et al  
METHOD AND SYSTEM FOR TREATMENT OF ATRIAL TACHYARRHYTHMIAS

CERTIFICATE UNDER 37 CFR §1.10. I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: USPTO, Commissioner for Patents, PO Box 2327, Arlington, VA 22202, Attention: Box Patent Application, "EXPRESS No ET498449503US, on this 12 day of December, 2001.

Barbara J. Lakanen

Printed Name

Signature

Commissioner for Patents  
PO Box 2327  
Arlington, VA 22202

Attention: BOX PATENT APPLICATION

Sir:

We are transmitting herewith the attached:



Patent Application Transmittal



Specification:

Total pages: 19 (including claims and abstract: Spec. 15 sheets; Claims 3 sheets; Abstract - 1



Drawings:

Total sheets: 19

☐ formal

☒ informal



Combined Declaration and Power of Attorney:

☒ newly executed

☐ copy from prior application

☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))

☐ Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*



Accompanying application parts:

☐ Notification of filing a

☒ Assignment of the Invention to Medtronic, Inc.

☒ Assignment cover sheet

☒ Information Disclosure Statement

☒ PTO Form 1449

☒ Copies of IDS citations

☐ Preliminary Amendment

☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.

☒ Return Postcard

IF A CONTINUING APPLICATION:



Continuation



Divisional



Continuation-in-part (CIP)

of prior application No. \_\_\_\_\_/\_\_\_\_\_.



Amend the specification by inserting before the first line the sentence: This application is a ☐ continuation ☐ division ☐ continuation in part of application number \_\_\_\_\_, filed \_\_\_\_\_.



Cancel in this application original claims \_\_\_\_\_ of the prior application before calculating the filing fee. (At least the original independent claim must be retained for filing purposes.)



The prior application is assigned of record to Medtronic, Inc.



The Power of Attorney in the prior application is to: \_\_\_\_\_.

☒ This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) 60/286,953, filed 04-26-2001.

☒ Address all future correspondence to: Daniel W. Latham, Reg. No. 30,401  
**Medtronic, Inc.**  
710 Medtronic Parkway  
Minneapolis, Minnesota 55432  
phone: (763)391-9661

| FEE<br>CALCULATION           | No. of Claims<br>Filed | Claims Included in<br>Base Fee | No. of<br>Extra<br>Claims | Rate  | Fee     |
|------------------------------|------------------------|--------------------------------|---------------------------|-------|---------|
| Total Claims                 | 31                     | 20                             | = 11                      | x 18  | 198     |
| Independent Claims           | 2                      | 3                              | =                         | x 80  |         |
| Multiple Dependent<br>Claims | Yes                    |                                |                           | + 270 | 270     |
| Basic Filing Fee             |                        |                                |                           |       | 740     |
| TOTAL                        |                        |                                |                           |       | 1208.00 |

Charge Deposit Account No. 13-2546 the sum of \$1208.00 (Filing Fee) and \$40.00 for Assignment recordation fee for a total of \$1248.00.

The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

Date

12/12/01

  
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